

# Foster Family Home - Corrective Action Report

**Provider ID:** 1-616146

**Home Name:** Ofelia Suarez, CNA

**Review ID:** 1-616146-8

1940 Kalihi Street

Reviewer: Maribel Nakamine

Honolulu

HI

96819

Begin Date: 6/1/2021

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Unannounced recertification inspection for a 2 person CCFFH completed.

Corrective Action Report issued during CCFFH inspection with a written plan of correction due to CTA on 7/1/2021.

Foster Family Home	Background Checks	[11-800-8]
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8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1), (2)- CG#2's APS/CAN/Fingerprinting lapsed on 12/21/2019 and renewed on 1/2/2020.

Foster Family Home	Information Confidentiality	[11-800-16]
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16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.(b)(5)- No confidentiality policies and procedures and client privacy rights training present for CG#3 and HHM#1.

Foster Family Home	Client Care and Services	[11-800-43]
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43.(c)(3) Be based on the caregiver following a service plan for addressing the client's needs. The RN case manager may delegate client care and services as provided in chapter 16-89-100.

Comment:

43.(c)(3)- No [REDACTED] RN delegation for CG#1 and CG#2 present in Client #2's chart.

Foster Family Home	Fire Safety	[11-800-46]
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46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

Comment:

46.(a)- No monthly fire drill for the months of September 2020 and May 2021.

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## Foster Family Home

## Physical Environment

[11-800-49]

49.(a)(2) Grab bars in bath and toilet rooms used by the client, as appropriate;

Comment:

49.(a)(2)- No [REDACTED] present near clients' toilet.

## Foster Family Home

## Quality Assurance

[11-800-50]

50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.(a)- No evidence of CG#2 of having had the CCFFH's Emergency Preparedness Plan training.

## Foster Family Home

## Client Rights

[11-800-53]

53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9)- No door locks from the inside for Client #1 and Client #2's bedroom doors. Under the My Choice My Way, for clients' privacy, door locks should be provided from the inside of bedroom doors.

## Foster Family Home

## Records

[11-800-54]

54.(c)(6) Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events;

Comment:

54.(c)(6)- No monthly RN summary visit completed for November 2020.

*Maikel Nakamine, M*

Compliance Manager

Date

*6/1/2021*

*[Signature]*

Primary Care Giver

Date

*6/1/2021*